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PTO/SB/05 (10-00) Approved for use through 10/31/2002 OMB 065 5032 U.S. Patent and Trademark Office U.S. DEPARTMENT OF COMMERCE

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UTILITY PATENT APPLICATION **TRANSMITTAL**

Attorney Docket No. 42390P12399

Eleanor P. Rabadam, et al. First Inventor

Title | MEMORY DEVICE PACKAGING INCLUDING STACKED PASSIVE

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Only for new nonprovisional applications under 37 CFR 1.53(b))	GENERAL MET 41998389 USG THE SAME				
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents	Assistant Commissioner for Patents ADDRESS TO: Box Patent Application Washington, DC 20231				
1. Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)	7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)				
2.	8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Form (CRF) b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or ii. paper c. Statements verifying identity of above copies ACCOMPANYING APPLICATION PARTS				
- Brief Description of the Drawings (if filed)	9. Assignment Papers (cover sheet & document(s))				
Detailed Description Claim(s) Abstract of the Disclosure	10. 37 C.F.R. § 3.73(b) Statement Power of Attorney (when there is an assignee)				
	11. English Translation Document (if applicable)				
4. Drawing(s) (35 U.S.C. 113) [Total Sheets \(\frac{\chi}{2} \] \(\frac{\chi}{2} \)	12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449				
5. Oath or Declaration [Total Pages]	13. Preliminary Amendment				
a. Newly executed (original or copy) b. Copy from a prior application (37 C.F.R. § 1.63(d)) (for continuation/divisional with Box 18 completed)	14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized)				
	15. Certified Copy of Priority Document(s)				
i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1 63(d)(2) and 1 33(b)	(if foreign priority is claimed) 16. Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.				
6. Application Data Sheet. See 37 CFR 1.76	17. Other:				
18. If a CONTINUING APPLICATION, check appropriate box, and	supply the requisite information below and in a preliminary amendment:				
☐ Continuation ☐ Divisional ☐ Continuation-in-	part (CIP) of prior application No:				
Prior application Information: Examiner	Group/Art Unit:				
	the prior application, from which an oath or declaration is supplied under				
Box 5b, is considered a part of the disclosure of the accompanying conti The incorporation <u>can only</u> be relied upon when a portion has been inadv	nuation or divisional application and is boroby incorporated by reference				
	ONDENCE ADDRESS				
I I	or Correspondence address below ADEMARK OFFICE or Attach bar code label here)				
Name					
Address					
	ate Zip Code				
Country Telephon					
Name (Print/Type) Donna Jo Coningsby	Registration No. (Attorney/Agent) 41,694				

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FEE TRANSMITTAL for FY 2000

Patent fees are subject to annual revision

TOTAL AMOUNT OF PAYMENT

Complete if Known				
Application Number				
Filing Date	12/28/01			
First Named Inventor	12/28/01 Eleanor P. Rabadam			
Examiner Name				
Group/Art Unit				
Attorney Docket No.	42390P12399			

METHOD OF PAYMENT (check one)		FEE CALCULA	ATION (continu	ıed)			
The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:	3. ADDITIONAL FEE						
Deposit Account 02-2666		Large Entity Small Entity					
Number 02-2000	Fee Fee Code (\$)	Fee Fee Code (\$)	Fee Description		Fee Paid		
Deposit Account Blakely, Sokoloff, Taylor & Zafman LLP	105 130	205 65 Surcharge -	late filing fee or	oath			
Name	127 50	227 25 Surcharge -	25 Surcharge - late provisional filing fee or				
Charge Any Additional Fee(s) Required Under 37 CFR §§ 1 16, 1 17, 1.18 and 1 20	139 130	cover sheet. 139 130 Non-English	specification				
Applicant claims small entity status See 37 CFR 1.27.	147 2,520	147 2,520 For filing a re	O For filing a request for ex parte reexamination				
	112 920*		920*Requesting publication of SIR prior to Examiner action				
2. Payment Enclosed:	113 1,840*	113 1,840 *Requesting p		R after			
Check ☐ Credit card ☐ Money ☐ Other ☐ Other	445 440	Examiner ac	tion				
FEE CALCULATION	115 110 116 400	215 55 Extension for216 200 Extension for					
BASIC FILING FEE	116 400	217 460 Extension for					
Targe Entity Small Entity	118 1,440	218 720 Extension for					
Fee Fee Fee Fee Description Fee Paid	128 1,960	228 980 Extension for					
101 740 201 370 Utility filing fee 740.00	119 320	219 160 Notice of App					
± 106 330 206 165 Design filing fee	120 320	220 160 Filing a brief		appeal			
107 510 207 255 Plant filing fee	121 280 138 1,510	221 140 Request for					
108 740 208 370 Reissue filing fee	140 110	138 1,510 Petition to in: 240 55 Petition to re		-			
	141 1,280	241 640 Petition to re					
SUBTOTAL (1) (\$) 740.00	142 1,280	242 640 Utility issue f					
2. EXTRA CLAIM FEES Extra Fee from	143 460	243 230 Design issue					
Claims below Total Claims 20 - 20 = 0 X 18.00 = \$0.00	144 620	244 310 Plant issue for					
Independent 3 - 3**= 0 X 84.00 = \$0.00	122 130	122 130 Petitions to t					
Multiple Dependent = 0.30	123 50 126 180	123 50 Prosessing fe126 180 Submission e		,			
Large Entity Small Entity	581 40						
Fee Fee Fee Fee Description	property (times number of properties)						
Code (\$) Code (\$) 103 18 203 9 Claims in excess of 20	146 740	246 370 Filing a subm		rejection			
102 84 202 42 Independent claims in excess of 3	149 740		(37 CFR § 1.129(a)) 370 For each additional invention to be				
104 280 204 140 Multiple Dependent claim, if not paid	170 740		examined (37 CFR § 1.129(b))				
109 84 209 42 **Reissue independent claims over original patent	179 740 169 900	279 370 Request for 0 169 900 Request for 6					
110 18 210 9 **Reissue claims in excess of 20	300	of a design a		IGGOTI			
and over original patent	Other fee (specify)						
SUBTOTAL (2) (\$) 0.00	Other fee (specify) *Reduced by Basic Filing Fee Paid SUBTOTAL (3) [75]						
or number previously paid, if greater, For Reissues, see below							
SUBMITTED BY Complete (if applicable) Registration No. 11 (01 1 1 1 1 1 1 1 1 1							
Name (Print/Type) Donna Jo Coningsby	(Attorney/Age		Telephone	(503) 684	-6200		
Signature Monna O Comm	re Cen		Date	12/28/	01		

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